

SOW Appendix

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AIR FORCE MATERIEL COMMAND INSPECTOR GENERAL
Maintenance Standardization and Evaluation Program and
Unit Compliance Inspection Checklist

Avionics

1 Nov 01

COMPLIANCE WITH THIS PUBLICATION IS MANDATORY

Note: This checklist is intended to be used in conjunction with the maintenance general practices checklist. It is not all-inclusive. It is applicable to all AFMC units/organizations.

Checklist Item	Yes	No	Total
1. Are safety precautions applied when working on electrical equipment? (AFOSH 91-66 and TO 00-25-234)			
a. Are rings, watches or other metallic objects, which may cause shocks or burns, removed? (TO 00-25-234, page xi)			
b. Is eye protection worn when soldering? (TO 00-25-234, para 3-6 c.)			
c. Are equipment rack doors closed at all times except as necessary to accomplish authorized repairs? (AFOSHSTD 91-66, para 1.7.3.1.)			
d. Are only approved solvents for cleaning electronics equipment used? (AFOSH 91-66, para 1.7.3.4.)			
e. Are workbenches kept clean at all times? (AFOSHSTD 91-66, para 1.7.3.7.)			
f. Are metal eyeglasses affixed with a device that prevents them from falling into energized electrical circuits? (AFOSHSTD 91-66, para 2.2)			
g. Is a safety observer present when working on energized equipment if the voltage is equal to or higher than 300 volts? (AFOSHSTD 91-66, para 1.7.1)			
2. Is electronic equipment visually inspected prior to testing and following any repair action? (TO 00-25-234, para 2-10)			
a. No loose or missing mechanical hardware?			
b. No frayed, burnt, pinched, or broken wires?			
c. Chassis mounted components and printed circuit cards are securely mounted?			
d. No missing, damaged, recessed, or bent connector contacts?			
e. Is wire insulation, around connector's contacts, serviceable?			
f. Do avionics maintenance personnel inspect and clean the pins and sockets of disconnected electrical connectors, LRUs, and inside equipment drawers, etc., for corrosion. (AFMCI 21-117, para 6.2.)			

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3. Has a preventive maintenance program for support equipment been established? (AFI 21-101, para 1.2)			
a. Are preventive maintenance inspections accomplished within prescribed time limits in accordance with equipment specific directives? (TO 00-20-5, para 2-22.1)			
b. Are inspection requirements and completion dates annotated on AFTO Form 244/245? (TO 00-20-5, para 7-1.1)			
4. Has an information security program been established to protect classified information? (AFPD 31-4, para 5 and AFI 31-401, para 1.3.)			
a. Do supervisors provide Information Security Training for personnel? (AFI 31-401, para 1.3.7. and 8.9.)			
b. Are semi-annual security inspections performed? (AFI 31-401, para 1.4.3.)			
c. Do classified storage containers have General Services Administration (GSA) labels and the Air Force Technical Order (AFTO) Form 36 attached? (AFI 31-401, para 5.19.)			
d. Does the SF Form 700 identify points of contacts for security containers storing classified material? (DOD 5200.1-R, para 6-404 b. (3))			
e. Is the end-of-day security check documented on the SF Form 701? (DOD 5200.1-R, para 6-302)			
f. Is the security container check annotated on the SF Form 702? (DOD 5200.1-R, para 6-302)			
g. Are security containers used only for classified information and not commingled with funds, weapons, jewels, precious metals, or drugs? (DOD 5200.1-R, para 6-400)			
h. Is removable storage media marked correctly? (AFI 31-401, para 4.6)			
5. Are Electrostatic Discharge (ESD) control procedures utilized for ESD Items? (TO 00-25-234, para 7-1)			
a. Has an ESD point of contact been established for the organization and a work area survey conducted? (TO 00-25-234, para 7-6 a.)			
b. Are ESD protective area signs posted for ESD control work areas? (TO 00-25-234, para 7-6 r.)			

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c. Is ESD packaging used for ESD items being stored or transported? (TO 00-25-234, para 7-5 d. (12))			
d. Are portable static control workstations and wrist straps used when handling or performing maintenance on ESD items? (TO 00-25-234, para 7-6 c.)			
e. Are personnel wrist straps removed when working on energized equipment? (TO 00-25-234, para 7-6 b. [Warning])			
f. Are ESD devices (personnel wrist straps, work surfaces) tested periodically? (TO 00-25-234, para 7-6 d., 7-6 p. and Table 7-5)			
6. Do depots manage 2-Level Maintenance (2LM) coded items effectively? (AFI 21-129 para 3.2.3.1)			
a. Are 2LM items, required by their customers, repaired on demand? (para 3.2.3.1)			
b. Is batch-processing (at the source of repair) of 2LM coded items avoided? (para 3.2.3.1)			
c. Are item/asset pipeline visibility tools used to monitor the logistics pipeline flow? (para 3.2.3.4)			
d. Has a surge plan been established for 2LM items? (para 3.2.3.7)			
AFMC Test Center Applications IAW AFMCI 21-119 (Questions 7- 10 not for ALCs)			
7. Do Wings/Installations manage 2-Level Maintenance (2LM) coded items effectively? (AFI 21-129 para 4.1.3)			
a. Are 2LM asset/item visibility tools used to ensure the flow of assets is not constrained? (AFI-21-129, para 4.1.3)			
b. Are 2LM assets processed through the repair sections within 24 hours? (para 4.2.1)			
8. Are workcenter supply requirements established and utilized? (AFMCI 21-119 para 4.3)			
a. Are supply control logs (AF Form 2413) and Issue/Turn in Requests (AF Form 2005) used to record parts ordered from supply? (para 4.3.1)			
b. Is the status of parts ordered verified against the Daily Document Register (DO4)? (para 4.3.1)			
c. Are procedures established for cross-cannibalization of parts? (para 4.3.3)			

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d. Has a functional check/calibrate prior to issue/operational flight program list been established and reviewed/updated semi-annually? (para 4.3.5 and 4.16)			
e. Has a direct Not Repairable This Station (NRTS) list been established and reviewed/updated semi-annually? (para 4.3.6)			
9. Has a bench check and repair policy been established, if applicable? (AFMCI 21-119, para 4.4)			
a. Has a turnaround transaction log (AF Form 2521) been established and contain the N/S/N or Part Number, total repair cycle days, maintenance action taken code, AFTO Form 350 tag number? (TO 00-20-3, para 3-5c)			
b. Is the turnaround log or AFTO Form 350 processed through the production scheduler and supply to update asset demand data? (TO 00-20-3, para 3-5)			
c. Are items ordered on a "Fill or Kill" basis? (para 4.4.1)			
10. Is repair cycle asset management effectively managed? (AFMCI 21-119 para 4.5)			
a. Do workcenters use AFTO Form 350 (3 part file) or CAMs to control maintenance actions/priorities? (para 4.5.2)			
b. Is supply status current and accurate for assets in the workcenter? (para 4.5.2.3)			

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Checklist Item	Yes	No	Total
General			
1. Is there adequate eye wash and/or body shower stations for emergency use within the immediate work area where individuals may be exposed to injurious corrosive materials? (AFOSH 91-32, 2.1.1.3)			
a. Are eyewash showers conspicuously identified and located in areas that require no more than 10 seconds to reach and within 100 feet? (para 2.6)			
b. Are eyewash stations within 25 feet of battery handling areas? (para 2.1.2.2)			
c. Does supervisor activate permanently installed eye wash units monthly to ensure proper operation? (para 2.10.1)			
d. Does supervisor conduct and document semi-annual testing? (para 2.10.2)			
e. Do self-contained eye wash units provide a minimum of 15 minutes continuous flow? (para 3.5)			
2. Is the proper Personal Protective Equipment (PPE) provided and used? (T.O. 8D2-3-1, para 3-4)			
a. Are rubber or acid resistant gloves, aprons, and face shield worn when handling electrolyte?			
b. Do personnel wear proper eye protection (safety goggles or face shield) while performing LOX maintenance and servicing?			
Oxygen			
3. Is oxygen servicing equipment kept clean and free of moisture, oil, and grease at all time? (T.O. 00-25-172, para 5-32, step c)			
4. Are oxygen carts parked in a proper area while awaiting and undergoing maintenance? (T. O. 00-25-172, para 5-32, step c)			
a. Do supervisors ensure oxygen carts are not parked in areas that are sodded, grassy, or asphalt covered?			

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Checklist Item	Yes	No	Total
b. Do supervisors ensure LOX carts containing LOX are not parked in hangers, nose docks, or other buildings not specifically designed for storage/or maintenance of such equipment?			
5. Is the proper distance criteria observed for the parking or storage of LOX carts containing LOX and oxygen bottle carts containing gaseous oxygen? (T.O. 00-25-172, para 5-32, step c)			
a. Are oxygen carts not parked within twenty-five feet of a structure not having fire resistant or non-combustible exterior walls?			
b. Are LOX/GOX carts parked farther than fifty feet from any combustible structures or sources of ignition, such as heavy traffic areas, areas where equipment is in operation or smoking areas?			
c. Are LOX/GOX carts parked farther than seventy-five feet from aircraft parking, fueling, or defueling?			
6. Do servicing personnel ensure their hands, feet, clothing, etc., are clean and free of petroleum based products? (T.O. 00-25-172, para 5-32, step d, item 1)			
7. Are only qualified personnel allowed to operate oxygen equipment or service aircraft systems? (T.O. 00-25-172, para 5-32, step d, item 3)			
Oxygen System Maintenance			
8. Are minimum controlled environment facilities used for overhaul of oxygen equipment? (T.O. 15X-1-1, para 2-1.1)			
a. Is the entrance into the work area limited to prevent thoroughfare or entry from other shops? (para 2-1.1.1)			
b. Are work areas keep clean at all times to ensure a dust-free environment? (para 2-1.1.4)			
9. Are personal hygiene requirements trained and enforced? (15X-1-1, para 2-1.1.5)			
a. Is lint-free clothing worn in shop area?			
b. Are cosmetics, medications, and fingernail polish removed prior to entering the shop?			

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10. Are all tools utilized for oxygen repair properly maintained? (15X-1-1, 5-1.2 [WARNING])			
a. Are oxygen repair tools used only for that purpose?			
b. Are oxygen repair tools stored separately and cleaned as necessary to be maintained free of hydrocarbon contaminants?			
Compressed Gas Cylinders			
11. Are compressed gas cylinders properly identified? (T.O. 42B5-1-2, para 3-2, step a)			
a. Do filled cylinders have one DD Form 1574 attached to identify cylinder content and another DD Form 1574 to identify the cylinder?			
b. When depleted, is DD Form 1574 pertaining to content removed, and is cylinder identification DD Form 1574 over-stamped "MT" to indicate it has been exhausted to between 5 and 24 psig?			
12. Are compressed gas cylinders properly stored when not in use? (T.O. 42B5-1-2, parac3-2, step c)			
a. Are cylinders stored inside whenever possible?			
b. Are cylinders protected against excessive rise and fall of temperature?			
c. Are cylinders stored a minimum of 50 feet from highly combustible materials such as oil, gasoline, waste, etc?			
d. Are cylinders outside protected from accumulation of ice and snow?			
e. Are cylinders stored away from electrical circuits, live wires, and rails of electrical equipment?			
f. Are cylinders stored away from areas that are continually damp, have salt, corrosive chemicals, or fumes of any kind?			
13. Are valve protection caps always installed when cylinder is not in use? (T.O 42B5-1-2, step f)			
Battery Maintenance			
14. Is the nickel-cadmium battery shop mechanically ventilated to provide 3 to 4 air changes per hour in order to ensure the removal of explosive hydrogen gas generated as a result of charging? (T.O. 8D2-3-1, para 3-14)			
15. Is the proper neutralizer available to clean-up battery acid spills? (T.O. 8D2-3-1, para 3-2)			

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Checklist Item	Yes	No	Total
a. Is vinegar, lemon juice, or a 5% solution of boric acid readily available to neutralize nickel-cadmium battery acid spills?			
b. Is a 6.0-ounce of sodium bicarbonate mixed in 1 gallon of potable water available to neutralize lead-acid battery electrolyte?			
16. Are tools used for servicing nickel-cadmium batteries properly insulated with heat shrink to prevent sparking or flashing? (T.O. 8D2-3-1, para 3-10)			
17. Do supervisors ensure smoking, open flames, sparks, arcs, and other sources of ignition are prohibited from the immediate vicinity of batteries that are being charged? (AFOSHSTD 91-66, para 1.3.1.8)			
18. Are separate storage battery facilities, or at least separate color-coded rooms, used for vented lead-acid and vented alkaline batteries? (T.O. 8D2-1-31, para 1.2.7.1)			
a. Are the lower four feet of walls light blue in a Ni-Cad shop and pink in a lead acid shop?			
b. Are separate heating and cooling systems used for each shop?			
c. Are separate ventilation systems used for each shop?			

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Foreign Object Damage

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Checklist Item	Yes	No	Total
1. Does the unit have a local operating instruction or directive that supplements or expands the requirements of AFMCI 21-122? (AFMCI 21-122, para 1.3)			
2. Are the Test Centers sending completed AFMC Form 40, Foreign Object Damage Record, to HQ AFMC/DOM by the 15th of each month? (AFMCI 21-122, para 1.5.2)			
3. Does the FOD program provide effective procedures and controls to prevent FOD? (AFMCI 21-122, para 3.1)			
a. Maintain cleanliness of maintenance and manufacturing areas at all times? (para 3.2.7)			
b. Ensure strict controls of all tools, equipment, rags, residue and hardware are accounted for at the end of each task? (para 3.2.9)			
c. Perform FOD checks on vehicles prior to entrance to flightlines or taxiways? (para 3.2.10)			
d. Do newcomers/orientation briefings address work order residue control procedures? (para 3.2.8)			
e. Are caps and plugs used on all openings to exclude FOD from aircraft systems or components? (para 3.2.1)			
f. Has each ALC/product center/test center/base developed local policy governing the wearing of hats on the flightline? (para 3.2.4)			
g. Wear pocketless coveralls when physically entering engine intakes or exhaust areas? (para 3.2.15)			
4. Have all applicable personnel completed annual FOD awareness training? (AFMCI 21-122, para 2.5)			
5. Are quarterly FOD briefings given to all maintenance, operations, and base support personnel working in, around, or traveling through FOD critical areas? (AFMCI 21-122, para 2.5.2)			

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Checklist Item	Yes	No	Total
6. Are all applicable newcomers briefed on FOD prevention within 10 days of reporting to duty? (AFMCI 21-122, para 2.5.1)			
7. Does the Center/Wing have an effective FOD/DO prevention publicity program? (AFMCI 21-122, 2.6)			
8. Has the unit appointed a FOD/DO prevention Officer? (AFMCI 21-122, para 2.2)			
a. Does this individual actively manage the FOD/DO program?			
b. Ensure all incidents of FOD/DO are reported to include reporting class A, B, and C incidents to HQ AFMC LGM/DOM within 24 hours?			
c. Appoint teams of appropriate personnel to investigate FOD incidents?			
9. Does the center/wing vice commander chair the FOD Prevention Committee? (AFMCI 21-122, para 2.4)			
a. Does the committee meet at least quarterly with the mandatory members present?			
b. Are minutes distributed to the center/wing commander, committee members?			
10. Are procedures in place to resolve known or suspected cases of FOD? (AFMCI 21-122, para 4.2)			
a. Impoundment and search/clear procedures?			
b. Documentation and reporting methods?			

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Aircraft Hydrazine (H-70) Maintenance

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Checklist Item	Yes	No	Total
1. Has the installation commander established local implementing instructions for H-70 Fuel Maintenance, Spill Management, and Neutralization, that meet regulatory requirements? (T.O. 1F-16(*)-2-49GS-00-1, para 4-2, 4-3, 4-11, 4-12, and 4-17 and AFOSH 48-8, para A8.3.2, & A8.3.6)			
2. Has the unit commander, director, or functional manager established controlled areas for H-70 maintenance/ servicing, 100 feet from flight line operations? (AFOSH 48-8, para 2.3 & A8.1 and T.O. 1F-16(*)-2-49GS-00-1, para 4-19)			
3. Has BE and functional supervisor ensured the appropriate level of respiratory protection is identified for personnel performing H-70 and EPU maintenance? (AFOSH 48-8, para 2.4., AFOSH 48-137, para 2.5.4.2, 2.5.4.3.5, 3.3., , TO 1F-16(*)-2-49JG-00-3, para 3-36 [WARNING] and TO 1F-16(*)-2-49-JG-00-1, para 1-2)			
4. Has the Aerospace Medicine Council and Public Health Office ensured the correct medical surveillance program code is assigned for personnel performing H-70 and EPU maintenance? (AFOSHSTD 48-8, para2.7, 2.9 and A8.3.5.)			
a. Are pre-placement evaluations completed prior to allowing personnel access to hydrazine maintenance controlled areas? (para A8.3.5.4.1)			
b. Are annual periodic evaluations performed for employees enrolled in the hydrazine medical surveillance program? (para A8.3.5.4.2)			
c. Does Installation Public Health (PH) monitor scheduling, completion, results, and trends for initial, periodic, and termination medical examinations? (AFOSHSTD 48-8, para 2.9 & A8.3.5.)			

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Checklist Item	Yes	No	Total
5. Does BE conduct initial and periodic exposure monitoring and inform employees and supervisors of results? (AFOSHSTD 48-8, para 2.6)			
a. Are periodic exposure evaluations conducted every six months for regulated areas either by sampling or verification of existing procedures? (para A8.3.1)			
6. Does BE test the fit of respirators and train the users who are enrolled in the respiratory protection program? (AFOSHSTD 48-8, para 2.6)			
7. Does supervisor provide annual or more frequent hydrazine risk training? (AFOSHSTD 48-8, para A8.3.7)			
8. Does the supervisor keep a log of each person who enters the controlled area for at least one year until BE can review it during the annual survey? (AFOSHSTD 48-8, para A8.3.9.)			
General Requirements			
9. Does the Emergency Response Plan address spill containment, dilution, collection, & neutralization? (AFOSHSTD 48-8, para A8.3.6.2)			
10. When adverse weather requires fired EPU maintenance in a hanger, are all personnel cleared from the area except Recovery/Response Team members? (T.O. 1F-16(*)-2-49GS-00-1, para 4-20)			
11. Has the organization made an emergency shower and eyewash available in the controlled area for flushing the eyes or skin of a person who has contacted liquid hydrazine? (AFOSHSTD 48-8, para A8.3.2.2)			
12. Is the smoking, eating, drinking, application of cosmetics, or storage of materials for consumption disallowed in the controlled area? (AFOSHSTD 48-8, para A8.3.2.4)			

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Checklist Item	Yes	No	Total
13. Are required and proper caution signs used at each entrance to the controlled area? (AFOSHSTD 48-8, para A8.3.8)			
14. Do Hydrazine Response Teams consist of a minimum of three people? (T.O. 1F-16(*)-2-49GS-00-1, para 4-2.)			
15. Does Personal Protective Equipment (PPE) approved by BE and utilized by personnel performing hydrazine maintenance meet Technical Order specification? (T.O. 1F-16(*)-2-49GS-00-1, Table 4-1 & 4-2)			
a. <i>Hydrazine fuel tank removal and installation:</i> Saranex 23P or CPF2 Coveralls, Gloves, Faceshield and Boots			
b. <i>Hydrazine Fuel Tank Nitrogen Depressurization:</i> Saranex 23P or CPF2 Coveralls, Gloves, and Faceshield			
c. <i>Hydrazine Fuel Hose and EPU Purge Procedures:</i> Saranex 23P or CPF2 Coveralls, Gloves, and Faceshield			
d. <i>Decomposition Chamber, Catalyst Bed Depth Measurement, and Poppet Valve Refurbishment:</i> Saranex 23P or CPF2 Coveralls, Gloves, and Faceshield			
e. <i>Cleanup of H-70 Spills:</i> Level A or Level B Suit with hood, faceshield and locking gloves, Boots, Respiratory Protection			
16. Does a Protective Equipment Inspection Program exist to ensure personal protective equipment and respiratory equipment is serviceable at all times? (T.O. 1F-16(*)-2-49GS-00-1, para 4-4.a.)			
17. Is a Hydrazine Field Kit assembled, prepackaged, and located where it may be readily dispatched? (T.O. 1F-16(*)-2-49GS-00-1, para 4-9)			
18. Are only 3M Powersorb (preferred) or wet cotton cloths used for spill clean up? (T.O. 1F-16(*)-2-49GS-00-1, para 4-10 & 4-12.g.)			

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Industrial Safety

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Checklist Item	Yes	No	Total
1. Has Center safety staff conducted a safety inspection/assessment within the past year? (AFI 91-202, para 3.1 and 3.1.4.4)			
a. Is there a copy of the annual safety inspection report on file with the work area?			
b. Does the report contain the following mandatory items:			
(1) Unit, activity, or work area inspected?			
(2) Date of inspection?			
(3) A description of any hazards or unsafe work practices, with reference?			
(4) Cause of deficiencies and hazards noted?			
(5) Recommendations for corrective action?			
(6) Risk assessment codes for identified hazards?			
c. Are spot inspections and follow-up reporting accomplished to ensure corrective action?			
2. Has Bioenvironmental performed a baseline or annual industrial hygiene survey? (AFI 91-301, para 2.14.16) (Note AFI 48-145 allows for a two year survey for Cat II Workplaces, Bio determines category of workplace)			
a. Is there a copy of the most recent survey on file?			
b. Was the most recent survey posted on the work place bulletin board for a minimum of ten days?			
c. Has Bioenvironmental followed up on hazards identified during surveys?			
3. Are approved variances or deviations on file for those safety conditions where it is either impractical or impossible to comply with OSHA or AFOSH guidelines? (AFI 91-301, para 6)			
a. Are variances/deviations processed through base SEG, then HQ AFMC/SEG, then forwarded to HQ AFSC/SEG for approval and on file with installation SEG? (para 6.6)			

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b. Are deviations only approved for a period not to exceed 90-days? (attach 1)			
c. Are exemptions to OSHA standards processed through OSHA? (para 6.2)			
4. Do supervisors provide and document training for employees in job safety, fire prevention and protection, and health as required by Occupational Safety, Fire Protection, and Health guidelines? (AFI 91-301, para 2.14.8)			
a. Is this training documented in section IV of the AF Form 55 or as specified elsewhere? (7.3.2)			
5. Are AF Forms 55, or its automated equivalent, maintained for each employee (except those in low risk administrative areas)? (AFI 91-301, para 7.3)			
6. Are all blocks of the AF 55 filled out as required? (AFI 91-301, attach 6)			
a. Item 5. Employee's Duty Title			
b. Item 6. Hazards of the Work Area			
c. Item 7. Indicate if duties require operational health medical examinations and define frequency			
d. Section I. Mandatory Items			
e. Section II. Personal Protection Issued			
f. Section III. Personal Protection Provided in Work Area			
g. Section IV. Date Specialized OSH Training was Provided			
h. Section V. Record Employee Safety			
7. Is Supervisor Safety Training (SST) documented on AF Forms 55? (AFI 91-301, para 7.2.3)			
8. Do supervisors maintain a training outline/lesson plan for briefing workplace specific initial and annual safety requirements? (AFI 91-301, para 7.3)			
a. Are lesson plans reviewed annually?			
b. Are lesson plans updated whenever equipment, procedures, or the work environment changes?			
c. Does the training outline, as a minimum, address mandatory items listed in Attachment 5?			

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9. Do supervisors of operations where there are exposures greater than Occupational Exposure Level (OEL) establish a respiratory protection program? (AFOSH 48-8, para 2.4) Note. See Respiratory Protection Checklist			
10. Are walking and working surfaces in maintenance areas and hangars properly maintained? (AFOSH 91-22)			
a. Are passageways (18-inch) clearly identified by contrasting markings (2-3 inch wide lines) unless excluded by ground safety? (para 1.2.1.1.2 and 1.2.1.1.4)			
b. Are floors clean and free of slippery substances and are drip pans used when needed? (para 1.2.1.2.1 and 29 CFR 1910.22)			
c. Are warning signs used for slipping hazards while floors are wet? (para 1.2.1.2.4)			
d. Are areas adjacent to sprinkler control valves, fuse boxes, and electrical panels clear of obstructions? (para 1.2.1.2.5)			
e. Are floor openings, manholes, ladderways, etc. guarded to include platforms 4-feet or higher? (para 1.2.1.6.1 and 1.2.1.6.4)			
f. Are stair and ramp vertical clearances, less than 7 feet, padded or highlighted with yellow/black stripes? (para 2.2.1.6)			
g. Are fixed ladders inspected and documented every 3-years by Civil Engineering? (para 3.2.3.1)			
11. Are portable ladders properly maintained? (AFOSH 91-22, para 4.2)			
a. Are metal ladders and wooden ladders with metal reinforced slide rails not used near exposed energized electrical circuits? (para 4.2.1.2.2)			
b. Are metal ladders labeled "Danger-Do Not Use Around Electrical Equipment" in red 1 or 2 inch letters? (para 4.2.2.6)			
c. Is training accomplished and documented on AF Form 55 for ladders with working height of 6-feet or more? (para 4.2.4)			

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Checklist Item	Yes	No	Total
d. Is only one person allowed on a portable ladder at any time, unless designated for use by two people? (para 4.2.5.1.12)			
e. Are ladders serviceable, and if not are they properly tagged with an AF Form 979, Danger Tag, and removed from service if the ladder exhibits the following defects: (para 4.2.2)			
(1) Cracked, split, or deformed side rails, steps, rungs, or related hardware?			
(2) Loose, or shearing rivets, connections, or spreaders?			
(3) Broken or missing steps, rungs, or cleats, side rails, or other defects?			
12. Are Emergency Shower and Eyewash units properly maintained? (AFOSH 91-32) (http://safety.kirtland.af.mil/AFSC/RDBMS/Ground/afoshcha.html)			
a. Are suitable facilities for quick drenching or flushing of the eyes and body provided for personnel exposed to injurious corrosive materials? (para 2.1.2.1 and 2.1.1.3)			
b. Are permanently installed units and self-contained units installed in fixed locations identified with highly visible signs? (para 2.7.2)			
c. Are permanently installed showers and eyewash units activated weekly and signed off by the supervisor to verify operation? (para 2.10.1)			
d. Are permanently installed shower and eyewash units inspected monthly by the supervisor using the applicable portions of para 3? (para 2.10.2 and para 3)			
e. Are self-contained units tested, refilled, and maintained according to para 2.10.1, and 2.10.2? (para 2.10.3)			
(1) Where tap water is used, is unit refilled at least monthly?			
(2) Where a water additive is used are manufacturers recommended fluid change schedules being adhered to?			
f. Are self-contained fluid levels checked monthly and tags or labels affixed showing the fluid change schedule? (para 2.10.3)			
g. Do eyewash bottles have instructions and expiration dates (if applicable) permanently affixed to the units? (para 2.10.4)			

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Checklist Item	Yes	No	Total
h. Are emergency eyewash showers and eyewash units conspicuously identified in locations no more than 10 seconds or 100 feet from a corrosive substance? (para 2.6.2.7.2)			
i. Are emergency shower and eyewash units located where the water spray will not contact any energized electrical circuit? (para 2.6)			
j. If electrical receptacles are installed in a location where they could become wet or damp from eyewash water spray, are they protected by weatherproof enclosure, ground fault circuit interrupter, or other equally effective means? (HQ AFMC MOR dated 13 Jun 00)			
k. Are self-contained units and supply lines for permanently installed units protected from freezing and from sunlight or other heat sources that could cause extremes in water temperature? (para 2.7.1)			
13. Are flammable/combustible storage cabinets properly maintained? (AFOSH 91-43, para 3.4)			
a. Not more than 120 gallons of liquids stored in any one cabinet?			
b. Not more than three (120 gallon each) cabinets in a single fire area?			
c. If there are more than three cabinets in a single area, are they separated by 100 feet?			
d. Are cabinets labeled "Flammable-Keep Fire Away"?			
e. Are vent openings sealed with bungs?			
f. If cabinet is vented, is it vented to an outside area?			
g. Are the bottoms, top, and sides of metal cabinets at least 18 gauge sheet steel and double walled with 1-1/2 inch air space, with 3-point lock and 2 inch door seals?			

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Checklist Item	Yes	No	Total
14. Are inside flammable/combustible storage rooms properly maintained? (AFOSH 91-43, para 3.5)			
a. Do openings to other rooms or buildings have 4-inch high liquid-tight raised sills or ramps? (para 3.5.1)			
b. Are rooms liquid-tight where walls join the floors? (para 3.5.1)			
c. Are fire doors self-closing? (para 3.5.1)			
d. Are containers used for dispensing or transferring of liquids electrically bonded? (para 3.5.1)			
e. Does every inside storage room have a six-air-exchange per hour ventilation system? (para 3.5.1)			
f. Are containers of liquids tightly sealed? (para 3.11.2)			
g. Do containers bear clearly legible labels to identify contents and indicate hazards? (para 3.9.15)			
h. Are open flame devices or smoking prohibited within 50 feet of the flammable or combustible storage area? (para 3.10.7)			
15. Is incidental storage of flammable liquids in industrial areas properly maintained? (AFOSH 91-43, para 3.12.1)			
a. Are storage cabinets marked "Flammable-Keep Fire Away"?			
b. Is storage limited to one gallon of Class I or 10 gallons of Class II liquid?			
c. Is storage limited to a 5-day supply of flammables?			
d. Is each workcenter limited to only one cabinet?			

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Checklist Item	Yes	No	Total
16. Does the unit have an effective Lockout and Tagout Program? (AFOSH 91-45)			
a. Are tags used only as a temporary warning prior to safeguarding or correcting the hazard? (para 2.2)			
b. Are locks used as a positive means of isolating energy sources and preventing the unexpected start-up of machines and equipment? (para 2.3)			
c. Are procedures developed and documented for the safe and proper use of locks and tags? (para 2.4, attachment 3)			
d. Has a training plan been developed to provide initial and recurring training on lockout and tagout procedures for supervisors, operators, and equipment maintenance personnel who utilize lock out tag out procedures and is this training documented on each individual's AF Form 55? (para 5.2.1 and 5.2.4)			
e. Are personnel, whose duties expose them to areas where lock out and tag out procedures are utilized, briefed annually as part of their job safety briefing and is this training documented on each individual's AF Form 55? (para 5.2.1.2 and 5.2.4)			
f. When a lock or tag is attached, is only the supervisor, designated representative, or individual who installed it authorized to remove it, and it is not bypassed, ignored or defeated? (para 5.2.2.2)			
g. Are tags securely attached? (para 5.2.2.4)			
h. Is a periodic inspection of the lockout and tagout program conducted and documented at least annually by a qualified ground safety inspector to ensure compliance? (para 5.3.1)			
(1) Is there identification of machines and equipment where lockout and tagout apply?			
(2) Is there a review of each person's responsibilities under the program?			
(3) Has all necessary training been conducted and documented?			

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Checklist Item	Yes	No	Total
17. Do unit personnel utilize proper manual lifting techniques? (AFOSH 91-46, chap 1)			
a. Are personnel trained annually on manual lifting techniques and is this training documented on AF Forms 55 or other authorized method? (para 1.2.1)			
b. Do personnel use proper manual lifting techniques? (para 1.2.2)			
(1) Feet close to load, far enough apart to balance load?			
(2) Crouch close to load, straight back, with bent knees?			
(3) Use full palm grip, lift object, shift weight to body (kinetic energy), and then stand?			
18. Are hoists/cranes properly maintained and operated? (AFOSH 91-46, Chap 5 and 7)			
a. Are only latch type hooks used on all hoists? (para 5.2.2.9)			
b. Is the rated load capacity permanently marked on the hoist? (para 5.2.2.10)			
c. Do only qualified personnel operate hoists/cranes? (para 5.2.3.3.11)			
d. Are loads not carried over personnel? (para 5.2.3.3.11)			
e. Is a record of all inspections, load testing, and maintenance maintained by the user? (para 5.2.4)			
f. Are daily or prior to use inspections properly conducted? (para 5.2.5)			
(1) Check controls and operation mechanisms for proper operation.			
(2) Check all safety devices including limit switches.			
(3) Hooks for deformation, cracks, chemical damage or defective safety latches.			
(4) Load carrying ropes for twists, wear, broken wires or improper dead-ending to the drum or other attachments.			
g. Has a designated person who maintains a record of the inspection performed periodic inspections of hoists at intervals between 1 and 12 months? (para 5.2.5.2 and 5.2.5.4)			

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Checklist Item	Yes	No	Total
19. Is proper personnel protective equipment provided and utilized as determined by a job safety analysis (JSA) conducted by the supervisor? (AFI 91-301, para 2.14.4, attachment 2, and AFOSH 91-31, para 3.1)			
20. Are employees (including management, supervisors, and visitors) provided, and do they use, appropriate eye/face protection when exposed to hazards from flying particles, molten metal, liquid chemicals, corrosives, caustics, chemical gases, vapors or potentially injurious light radiation? (AFOSH 91-31, para 3.1)			
a. Whenever a task is above eye level, and the worker must look up into the area being worked on, is eye protection worn? (para 3.10)			
b. Are metal-framed glasses secured with a cord or strap to prevent them from falling into energized circuitry? (para 3.1.5)			
c. Are face shields used as the primary eye and face protection only in areas where splashing rather than impact resistance is the problem? (para 3.1.12)			
21. Are personnel who work in areas where there is a potential for injury from falling or flying objects, or electrical shock or burns, provided protective helmets and do they use them? (AFOSH 91-31, para 3.2)			
a. Do hard hats provide the level of protection required? (para 3.2.1) Note: Bump hats are for bumping hazards only and will not be used as a substitute for hard hats. (para 3.2.3)			
(1) Class A: used to reduce the force of impact and protect against low electrical shock up to 2200 volts (construction workers)			
(2) Class B: used to reduce force of impact and protect against high electrical shock up to 20,000 volts (electrical workers)			
(3) Class C: used to reduce force of impact from falling objects (no electrical protection)			

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Checklist Item	Yes	No	Total
22. Does the supervisor properly control human factors related to job safety and personnel protective equipment? (AFOSH 91-31, para 3)			
a. Do workers who work around chains, belts, rotating devices, suction devices, and/or blowers cover their long hair (longer than 4 inches, or as determined by work supervisor) to prevent it from being caught in machinery? (para 3.2.4)			
b. Do personnel who are exposed to high noise levels wear specifically designed protection, as determined by a BIO survey? (para 3.2.4)			
c. Is appropriate hand and arm protection provided and used for employees whose hands or arms are exposed to hazards such as skin absorption of chemicals, severe cuts, punctures, chemicals, or harmful temperature extremes? (para 3.6)			
d. Is protective footwear with an impact resistant toe provided and worn in areas, determined by the supervisor, as having a reasonable possibility of personnel sustaining foot injuries? (para 3.7)			
e. Do personnel exposed to vehicle or aircraft traffic during hours of darkness or periods of reduced visibility wear reflective accessories? (para 4.2)			
23. Are floors and walking surfaces (where people work) free of potential tripping hazards, such as tools, electrical cords, air lines, packaging materials and fluid spills? (AFOSH 91-66, para 1.1.1)			
24. Do personnel practice good electrical safety practices? (AFOSH 91-66, para 1.7)			
a. Do workers perform repair of equipment only after it has been de-energized and locked out and tagged? (para 1.7.1)			
b. Is equipment de-energized before components are removed? (para 1.7.3.3)			
c. Are electrical fuses, switches, and circuit breakers boxes marked with the correct voltage? (para 1.7.3.8)			

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Checklist Item	Yes	No	Total
25. Are fire extinguishers properly maintained? (AFOSH 91-56)			
a. Are fire extinguishers unobstructed and readily accessible? (para 2.4.5)			
b. Do supervisors conduct monthly visual inspections? (para 2.4.6)			
(1) Extinguisher located in designated place?			
(2) No obstruction to access or visibility?			
(3) Operating Instructions legible and facing outward?			
(4) Safety seals and/or tamper indicators not broken or missing?			
(5) Pressure gage reading or indicator in operable range?			
c. Are personnel who work in industrial areas trained in proper fire extinguisher use and is this training documented on AF Form 55, or automated equivalent? (para 2.4.6)			
26. Is the exact identification of materials in any piping system for hazardous materials labeled by means of titles lettered in black or white, prominently displayed adjacent to color bands? (AFOSH 91-44, para 2.6)			
Note: Table 3 is not to be used as a guide for piping identification			

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Maintenance General Practices (Master)

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COMPLIANCE WITH THIS PUBLICATION IS MANDATORY

Note: This checklist is intended to be used as a guide to ensure all areas common to any maintenance organization are properly managed. It is not all-inclusive. It is applicable to all AFMC units/organizations.

Checklist Item	Yes	No	Total
1. Are technical orders maintained and used correctly? (AFMCI 21-110, 21-301, T.O. 00-5-1, 00-5-2, and AFI 21-101) (See T.O. MSEP/UCI checklist)			
2. Is the Foreign Object Damage (FOD) program managed correctly? (AFMCI 21-122, and AFI 21-101) (See FOD MSEP/UCI checklist)			
3. Are tools maintained and accounted for? (AFMCI 21-107, 21-119, T.O. 31-1-101, and AFI 21-101) (See Tool Control MSEP/UCI checklist)			
4. Is the work environment safe for workers? (AFOSH 91-series standards and, AFI 91-301) (See Industrial and Flight Line Safety MSEP checklists)			
5. Is equipment being maintained properly to include AGE, slings, and TMDE? (T.O. T.O. 00-20-5) (See Equipment MSEP checklist)			
6. Are supply parts, bench stock, shop stock, and operating stocks maintained correctly? (AFI 21-101, Chap 6, AFMCI 21-130, AFMCI 21-119) (See Material Control or Parts Management MSEP checklist)			
7. Are workers properly trained and certified to perform the work they are doing? (AFI 21-101, AFI 36-2101, AFI 36-2201, AFMCI 36-201, and AFMCI 21-108) (See Training MSEP/UCI checklists)			
8. Are the specific maintenance management practices common to the functional area you are evaluating in compliance with Air Force guidance? (See the specific functional area MSEP checklists that apply)			

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Precision Measurement Equipment Laboratories (PMEL)

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COMPLIANCE WITH THIS PUBLICATION IS MANDATORY

Note: This checklist is intended to be used in conjunction with the maintenance general practices checklist. It is not all-inclusive. It is applicable to all AFMC units/organizations.

Checklist Item	Yes	No	Total
1. Does the PMEL manager (Flight Chief, Functional Area Chief, etc) ensure the PMEL is effectively and efficiently organized per TO 00-20-14? (T.O. 00-20-14, para 3.9)			
a. Is a customer relations program established which includes customer contact? (AFMCI 21-119, para 13.2.4 and para 13.2.4.1)			
b. Has the PMEL manager established a TMDE Coordinator training program? (TO 00-20-14, para 3.9.2.y)			
c. Has a system been established to control test fixtures? (TO 00-20-14, para 3.9.2.z)			
(1) Does the system provide an identity on the test fixture that can be related to the equipment/calibration procedure for which the test fixture was fabricated? (TO 00-20-14, para 3.9.2.z.1)			
d. Is a tech order file maintained on the use and operation of all relevant equipment, on the handling and preparation of items, and for calibrations/verifications? (TO 00-20-14, para 3.9.2.cc)			
e. Does the PMEL manager ensure Requests for Calibration Responsibility Determination are not submitted for equipment owned and used by departments outside the Air Force? (TO 00-20-14, para 3.9.2.ee)			
f. Does the PMEL manage ensure initial testing on new items is performed when the PMEL has the capability, a calibration procedure exists, or adequate commercial data or maintenance tech data is available to permit testing? (TO 00-20-14, para 3.9.2.ff)			
g. Is password control being utilized to prevent unauthorized access to the PMEL automated management system (PAMS)? (TO 00-20-14, para 3.9.2hh)			
h. When a PMEL owned standard has a limited or special calibration certification label (AFTO Form 99 or 398), does the PMEL ensure the limited or special calibration is documented in the USER APPROVAL block of the AFTO 99 or with initials in the INI block of AFTO 398? (TO 00-20-14, para 3.3.1)			

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Checklist Item	Yes	No	Total
i. Does PMEL management complete the RCS HAF-ILM (SA) 7808 semi-annual report by 30 June and 31 December and is the report submitted to AFMETCAL Det 1 to arrive by the 31 st of July and January each year? (TO 00-20-14, para 6.1.1 thru 6.1.2)			
j. Does PMEL management complete the annual RCS HAF-ILM (A) 9450 PMEL Inventory Listing by 31 December and arrives at AFMETCAL Det 1 not later than 31 January each year? (TO 00-20-14, para 6.2.2)			
2. Does the PMEL manager ensure personnel are trained and qualified? (TO 00-20-14, para 2.6)			
a. Does the PMEL manager ensure the training records are maintained with the relevant qualifications, training, skills and experience of technical personnel, and the records are made available and periodically reviewed by the employee and PMEL management? (TO 00-20-14, para 2.6.1)			
b. Does the PMEL manager ensure personnel who certify TMDE are appropriately qualified? (TO 00-20-14, para 3.9.2.q)			
3. Does the PMEL manager establish and maintain the PMEL in a condition facilitating proper performance of calibrations/verifications? (TO 00-20-14, para 8.1)			
a. Are vehicle maintenance inspections accomplished on the Jet Engine Calibration Trailer? (TO 33D4-6680-1)			
b. Are measurement restrictions imposed and a log maintained to ensure calibrations are not accomplished when environmental conditions are outside prescribed specifications? (TO 00-20-14, para 3.9.2p and 8.2.2)			
c. Has a geodetic survey been accomplished? (TO 00-20-14, para 8.1.4)			
d. Are measures taken to ensure good housekeeping to include no eating, drinking, smoking is permitted in the calibration and repair area? (TO 00-20-14, para 3.9.2.w)			
e. Is the PMEL facility ground checked at least every 2 years? Is a letter, or certificate of inspection on file in the PMEL? (TO 00-20-14, para 8.1.3)			

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Checklist Item	Yes	No	Total
f. Is an airlock and shoe cleaner, with vacuum systems, provided at the entrance to the calibration repair area? (TO 00-20-14, para 8.10)			
g. Does PMEL management ensure nothing listed as environmentally sensitive is calibrated during environmental outages, unless special provisions are made, documented, and documentation is kept on file? (TO 00-20-14, para 8.2.2 and 8.2.3.4)			
h. Is a high grade of commercial vinyl plastic floor covering used in the calibration area and not covered with carpet or wax? (TO 00-20-14, para 8.12)			
4. Has an effective safety program been established? (TO 00-20-14, para 3.11.2r and AFOSHSTD 91-90)			
a. Are personnel trained in providing Cardiopulmonary Resuscitation? (AFOSHSTD 91-90, para 2.11.2)			
b. Are laser systems that can interfere with or cause a safety problem for adjoining operations placed in a dedicated room or area? (TO 00-20-14, para 8.11.1 and AFOSHSTD 91-90, para 3.9)			
c. Do personnel remove rings watches or other conductive objects while working on, with , or near energized electrical circuits? Are metal eyeglasses secured by a band or cord? (AFOSHSTD 91-90, para 2.2)			
d. Do personnel wear Personal Protective Equipment (PPE) while performing the following operations? (AFOSHSTD 91-90, para 2.3 and Table 1)			
(1) Cathode Ray Tube Installation and Removal Face shield/Safety Glasses, Gloves			
(2) Soldering Respirator (when Bioenvironmental Engineer (BBE) determines area ventilation is inadequate), Eye protection (side and frontal), Face shield or safety goggles (Normal prescription glasses may be used in place of safety goggles for light electronic equipment soldering)			
(3) Liquid Fluorocarbons (Freon) Impervious gloves, Eye protection (side and frontal)			

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Checklist Item	Yes	No	Total
e. Are grounding sticks available for use at all electronic work stations? (AFOSHSTD 91-90, para 2.8.9)			
5. Does PMEL maintain a Quality Program (QP) IAW T.O. 00-20-14, Sec 9 and applicable AFMC directives? (TO 00-20-14, para 3.9.2.o and AFMCI 21-119, para 13.3)			
a. Are PMEL Quality Assurance personnel appointed in writing and are they highly qualified 7 levels whenever possible? (AFMCI 21-119, para 13.3.1.1 and TO 00-20-14, para 9.1)			
b. Is equipment calibrated on-site subject to the same selection criteria and method of review as equipment calibrated in the PMEL? (TO 00-20-14, para 9.3.1)			
c. Do PMEL supervisors and managers use QP data to proactively monitor and control the quality of all PMEL processes? (TO 00-20-14, para 9.1)			
d. As a minimum, does each technician calibrating TMDE participate in at least one PR per year (appropriate to the technician's position, skills and training)? (TO 00-20-14, para 9.6.b)			
e. Do PMEL managers review, and consider adjusting, their QP sampling rates when negative or positive trends in production quality are observed, when changes occur in the overall skill level of the workforce, or when there are changes in the nature of the TMDE workload? (TO 00-20-14, para 9.5)			
f. Does PMEL management perform an analysis of PMEL statistical data, and verify the effectiveness of corrective actions implemented during the process improvements? (TO 00-20-14, para 9.11)			
6. Is a technical manager (PMEL Laboratory Chief, etc.) designated who has overall responsibility for the technical operations? (TO 00-20-14, para 3.9.2e)			
a. Are calibration intervals and procedures selected properly? (TO 00-20-14, para 3.1.2)			
b. Are correct action taken and how mal codes used to document calibration and maintenance? (TO 33K-1-100-1, para 2.4)			

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Checklist Item	Yes	No	Total
c. Are certification and other calibration data forms correctly annotated? (TO 00-20-14, section 5)			
d. Does PMEL, upon receipt of new equipment, determine warranty expiration dates, and complete and return any warranty cards? (TO 00-20-14, para 4.8.1.a)			
e. Does PMEL calibrate the new equipment, or, if repair is required and is covered by warranty, return to owner/user with appropriate information required to promptly send the item through Base Procurement and contracting office? (TO 00-20-14, para 4.8.1.b)			
f. Are all unmated connectors kept covered with moisture-proof and vapor-proof caps (with the exception of environmentally controlled storage)? (TO 00-20-14, para 3.7.1.5)			
i. Does the calibrating technician return the TMDE to the cleaning room when the item is disassembled and found dirty internally (vacuuming only may be done in the calibration area)? (TO 00-20-14, para 3.7.3)			
j. Does PMEL after calibration, whenever reasonable and conditions permit, short cycle the next date due calibration so the item shall arrive back in PMEL no later than 30 days prior to warranty expiration date? (TO 00-20-14, para 4.8.1.c)			
7. Does the customer service function, production scheduling function, and material control functions perform duties as required in AFMCI 21-119, para 13.4? (AFMCI 21-119, para 13.4.1, 13.4.2, and 13.4.3)			
a. Are customers who fail to deliver TMDE to PMEL as scheduled notified and advised to remove TMDE from service unless a calibration extension was previously authorized IAW TO 00-20-14? (AFMCI 21-119, para 13.4.1.4 and 13.4.1.4.1)			
b. Are unit commanders notified when items of TMDE are not delivered to the PMEL by the established delivery date? (AFMCI21-119, para 13.4.1.4.3)			
c. Does the scheduler train owning workcenter TMDE monitors and alternates on the TMDE program and their responsibilities? (AFMCI21-119, para 13.4.1.5)			

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Checklist Item	Yes	No	Total
d. Is a "hold area" set up, is it reviewed on a weekly basis, and are customers notified of their equipment status? (AFMCI21-119, para 13.4.2.2)			
e. Are records of all demands on supply being maintained in an orderly manner? (AFMCI21-119, para 13.4.3.1)			
f. Are bench stocks maintained and are current listings of contents available? (AFMCI 21-119, para 13.4.3.8)			

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Maintenance Standardization and Evaluation Program Checklist

Material Control

01 Nov 01

COMPLIANCE WITH THIS PUBLICATION IS MANDATORY

Note: This checklist is intended to be used in conjunction with the maintenance general practices checklist. It is not all-inclusive. It is applicable to all AFMC Air Logistics Centers and AMARC.

Checklist Item	Yes	No	Total
Introduction and General Rules			
1. Is all frequently used materiel (bits & pieces, components, and unserviceable end-items ready for repair) owned and managed by supply and carried on D035K detail records for control. (AFMCI 21-130, para 1.3.1)			
2. Are Production items AWM, routed items, and loan equipment properly stored? (AFMCI 21-130, para 1.4.1.3)			
a. Are the items segregated, and protected from pilferage and damage?			
b. Are items tagged for identification indicating serviceable/unserviceable condition?			
c. Are serviceable assets and unserviceable assets segregated?			
3. Are direct and indirect material items (shop material) that are removed for accessibility during the repair process identified, stored, and protected? (AFMCI 21-130, para 1.4.1.4)			
4. Is indirect material (bench stock), shop stock, work order residue and kit residue properly managed and stored? (AFMCI 21-130, para 1.6.5)			
a. Is residue from work orders or expense material NOT maintained on the shop floor? (para 1.6.5.1)			
b. Is indirect material (bench stock), shop stock, work order residue and kit residue located by bin in a SSC/WSSC-designated location? (para 1.6.5.3)			
c. Are bins labeled to identify nomenclature (RCC, NSN, Noun, part number, unit of issue, cost, authorized bin quantity, and shelf life (if applicable)), and date of last review (the date the bin was last reviewed for level and proper identification)? (para 1.6.5.3)			
d. Is only serviceable material stored? (para 1.6.5.4)			

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5. Does the SSC/WSSC review shop materiel requests for correctness and completion? (AFMCI 21-130, para 1.8.2.1)			
a. Is the G402A JON Front Edit process used to ensure requested quantities are not in excess of requirements? (para 1.8.2.1.1)			
b. Order and coordinate delivery of material, special tools, equipment, and hazardous material? (para 1.8.2.1.6)			
6. Is the back order reconciliation process properly managed and controlled? (AFMCI 21-130, para 1.8.2.2)			
a. Is the SSC/WSSC performing backorder reconciliation with the production shops using data from G042A and D035K?			
b. Are backorders canceled or file maintained prior to JONs moving to status 2?			
c. Is cancellation of backorders occurring following specified daily and monthly review of G402A and D035K reports?			
7. Is the EPS Front End Edit material transaction process properly managed and controlled? (AFMCI 21-130, para 1.10)			
a. Is the override switch set to "S" in all production shops? (para 1.10.1)			
b. Does the shop supervisor approve all G402A overrides? (para 1.10.2)			
c. Are G402A front-end edits tracked by PD, Division, RCC, and PDN to analyze trends in material usage? (para 1.10.4)			
d. Has the ALC/LG implemented a metric program to track G402A overrides as a management indicator of possible abnormal ordering practices? (para 2.5.5.3)			
8. Have local procedures been developed to provide the simplest and most efficient methods to turn-in excess or unserviceable ERRC XB3/XF3 items? (AFMCI 21-130, para 1.12.1)			
a. Have all PDs established and maintained turn-in and pick-up points for serviceable or unserviceable ERRC XB3/XF3 material? (para 1.12.3)			
b. Is each point conspicuously marked to show the RCC authorized to place materiel there? (para 1.12.3)			

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9. Are material transactions and cost corrections properly processed? (AFMCI 21-130, para 1.13)			
a. Does the SSC/WSSC, working jointly with the PD cost analyst, reconcile material issue requests/receipts to billing records to ensure all material has been received for which maintenance has been billed? (para 1.13.1.1)			
b. Do maintenance personnel, when requesting material, provide NSN, part number, quantity, JON, SRD, PCN, and name? (para 1.13.2.2)			
c. Are all serviceable material requests reviewed by the PMT/FLS within the SSC/WSSC to assure the item requested applies to the production item requiring repair and is ordered against the correct production number, operation number, and quantity is correct? (para 1.13.2.2)			
d. Is the SSC/WSSC making material cost corrections on the G004H (Actual Material Cost System Listings) and forwarding corrected listings to the responsible production shop? (para 1.13.5.)			
10. Has the PD developed and published an issue certification process? (AFMCI 21-130, para 1.14.1)			
a. Is the ALC/LG performing annual audits of each PD to ensure a written issue certification policy is in place and within guidelines? (para 1.14.5)			
b. Is approval obtained from the shop supervisor prior to ordering material not listed on the BOM? (para 2.5.3.2)			
11. Are Product Quality Deficiency Reports (PQDRs) properly processed and controlled? (AFMCI 21-130, para 1.17)			
a. Are exhibits processed and investigations started within 5 days after receipt of the exhibit? (para 1.17.2)			
b. Are routine investigations being completed on average within 120 days? (para 1.17.2)			
c. Are unprogramed work analysis and report generation prepared on AFMC Forms 206 using a type "6" project order? (para 1.17.3.1)			
d. Are programmed work analysis and report generation processed using permanent control numbers with a "G" job designator? (para 1.17.3.2)			

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e. Does a DD Form 2332, Product Quality Deficiency Report Exhibit, accompany each exhibit sent to the repair ALC for processing? (para 1.17.3.7)			
12. Is the processing of material received with discrepancies properly managed? (para 1.19)			
a. Does each PD establish, implement, and enforce receipt certification? (para 1.19.3)			
13. Are part supportability issues properly managed? (AFMCI 21-130, para 1.20) Note: See AREP/DREP Checklist			
a. Does the Part Availability Strategy Team (PAST) and WSSC Supportability Team develop part strategies for problem items in an effort to resolve current and prevent future parts shortages? (para 1.20.3.3)			
b. Does the SSC/WSSC perform supportability analysis and develop parts availability strategies? (para 1.61.11 and 1.61.16)			
14. Have procedures been developed to prevent inadvertent disposal of saleable or salvageable government assets and material? (AFMCI 21-130, para 1.22.4)			
a. Are disposal areas for reusable containers, pallets, wooden crates, trash, and scraps clearly marked? (para 1.22.4.1)			
b. Are reusable containers inspected and properly tagged with an AFMC Form 101, Verification of Content Removal tag, or AFMC Form 102, Verification of Content Removal label, prior to reclamation processing? (para 1.22.4.2)			
15. Are control and review of high priority material requests properly managed? (AFMCI 21-130, para 1.23)			
a. Are high priority requests reviewed by each division monitor to prevent degradation of the priority system? (para 1.23)			
b. Are steps taken to bring the priority rate within acceptable limits when the rate is exceptionally high? (para 1.23.2.2)			
16. Are sensitive items properly controlled, secured, and distributed? (AFMCI 21-130, para 1.25)			
a. Are sensitive items marked "SENSITIVE ITEM" when delivered to production? (para 1.25.1)			
b. Are signatures required when issuing and turning in sensitive items? (para 1.25.1)			

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17. Is the processing of Storage Restriction Items properly controlled and documented? (AFMCI 21-130, para 1.26.1)			
a. Are AFMC Forms 959 used to document and control all items subject to regulatory storage restrictions while end items are undergoing repair?			
18. Is the Disassembly and Reclamation process properly managed and documented? (AFMCI 21-130, para 1.28)			
a. Are AFMC Forms 206 routed to the responsible production planning function? (para 1.28.3.1)			
b. Does the planning function prepare an AFMC Form 237 and send it to the appropriate workload manager? (para 1.28.3.1)			
c. Does the production shop properly tag parts and end items, list items removed on the back of the 1577-2, Unserviceable (Reparable) Material Tag, and return all parts and end items to the SSC/WSSC? (para 1.28.3.4)			
19. Are Bench Sets and Loan Property authorizations properly managed and controlled? (AFMCI 21-130, para 1.29)			
a. Is an AFMC Form 201, Equipment Action Request, for required bench sets or test standards completed listing all required components to support a specific system? (para 1.29.3.2.2)			
20. Are Rob-back and Cannibalization Actions properly controlled, tracked, and documented? (AFMCI 21-130, para 1.30)			
a. Does the PD track occurrences of rob-backs in each RCC and maintain the data for at least one year? (para 1.30.1.1)			
b. Does the fixer use an AFMC Form 206 to fund carcass cannibalizations? (para 1.30.2)			
21. Are Production Items Awaiting Parts (AWP) properly controlled and processed? (AFMCI 21-130, para 1.31) Note: See DREP Checklist			
a. Are all shops utilizing the D035K AWP process? (para 1.31)			
b. Is AWP a discussion topic at all DREP meetings? (para 1.31.3)			
c. Is the D035K AWP process used for non-programmed workloads? (para 1.31.7)			

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(1) Are temporary workloads processed using an AFMC Form 206? (para 1.31.7.1)			
d. Do shop supervisors and the SSC/WSSC Chiefs jointly reviewing D035K AWP Validation Reports on a weekly basis to ensure accuracy? (para 1.31.8)			
22. Are Floating Stock/Spares properly managed and controlled? (AFMCI 21-130, para 1.32)			
a. Is floating stock limited to only ERRC XD2 assets? (para 1.32.2.1)			
b. Is floating stock used to support job-routed maintenance only? (para 1.32.2.1)			
c. Are floating stock/spares properly accounted for on the D035K detail? (para 1.32.2.1.2)			
d. Is an annual inventory of floating stocks/spares levels conducted annually? (para 1.32.2.3)			
e. Is floating stock calculated according to the established formula on the AFMC Form 100? (para 1.32.2.5)			
f. Does the PD Chief or designated representative approve all floating stock requests exceeding \$49,999 by entering initials in the PD approval block of the AFMC Form 100? (para 1.32.2.6.1.3)			
23. Is Organic Manufacture properly identified, documented, and reported? (AFMCI 21-130, para 1.33)			
a. Are line support organically manufactured items correctly processed using EPS, D035K, and AFMC Forms 206? (para 1.33.4.7.1.1)			
b. Is engineering planning working with the SSC/WSSC to track all manufacturing requests (stock listed and non-stock listed items tracked separately) done solely to satisfy an emergency requirement for depot line support due to parts shortages? (para 1.33.5)			
24. Is Indirect and Bench Stock Material properly identified, tracked, stored, and managed? (AFMCI 21-130, para 1.41)			
a. Are only items classified as indirect material (ERRC XB3/XF3) stored in bench stock? (para 1.41)			
b. Is only serviceable material maintained or stored in indirect material locations or bench stock bins? (AFMCI 21-130, para 1.41.4)			

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c. Are bench stocks composed of an average of 30-day quantity of items each shop has used during the past year? (para 1.41.3)			
(1) Are bench stock bin levels checked at least weekly by the SSC/WSSC and replenished as required? (para 1.44.2)			
(2) Is excess bench stock turned in to the SSC/WSSC for disposition? (para 1.48)			
d. Is bench stock tracked and managed in EPS? (para 1.42)			
e. Is each individual bin, whether it is located in a secured area (SSC/WSSC as example) or on the shop floor in an open bin, labeled to identify the RCC, NSN, noun, unit of issue, authorized quantity, shelf life (if applicable), part number, end item used on, and date of last review? (para 1.44.2)			
f. Are bench stock authorizations and levels reviewed at least every 90 days and labels updated to reflect date of last review? (para 1.44.2)			
g. Is the amount of bench stock maintained at an individual workbench location within established guidelines? (para 1.49)			
(1) Are pins, nuts, bolts, etc., limited to a 2- or 3-day supply? (para 1.49.1.1)			
(2) Are items such as wire, tape, solder, etc., limited to a maximum quality one roll? (para 1.49.1.1)			
25. Is all material in storage properly identified, protected, and stored? (AFMCI 21-130, para 1.47)			
a. Are items properly tagged (if the identity or condition of the bench stock material is obvious, tagging isn't required; however, if the identity or condition isn't obvious, one tag is acceptable for the quantity contained in a bag, box, bin, etc.)? (para 1.47.1.1)			
b. Are raw stock materials identified as required in T.O. 42D-1-3 or have a legible mill marking? (para 1.47.1.2)			